

## PLACE OF BIRTH

## ARIZONA STATE BOARD OF HEALTH

1. County of Gila

District of \_\_\_\_\_

Town of Miami

or

City of \_\_\_\_\_ No. \_\_\_\_\_ St. \_\_\_\_\_ Ward \_\_\_\_\_

BUREAU OF VITAL STATISTICS  
ORIGINAL CERTIFICATE OF BIRTHState Index No. 138County Registrar No. 861

Local Registrar No. \_\_\_\_\_

2. Full name of child Rosilie Nava { If child is not yet named, make supplemental report, as directed.3. Sex of Child male { To be answered ONLY in event of plural births. } 4. Twin, triplet or other \_\_\_\_\_ 6. Legitimate? yes 7. Date Oct 5 - 1926  
Month Day Year8. FATHER Full name Rosilie Nava 14. MOTHER Full maiden name Petra Baldrana9. Residence (Usual place of abode) 725 1/2 Sullivan St 15. Residence (Usual place of abode) 725 1/2 Sullivan St  
If non-resident, give place and state.10. Color or race Mex 11. Age at last birthday 25 (Years) 16. Color or race Mex 17. Age at last birthday 38 (Years)12. Birthplace (city or place) Santa Rita 18. Birthplace (city or place) Santa Rita  
(State or country) New Mex (State or country) New Mex13. Occupation miner 19. Occupation Housewife  
Nature of industry20. Number of children of this mother { (a) Born alive and now living 4 } 21. Were precautions taken against ophthalmia neonatorum? yes  
(Taken as of time of birth of child herein certified and including this child.) { (b) Born alive but now dead \_\_\_\_\_ }  
(c) Stillborn \_\_\_\_\_

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

I hereby certify that I attended the birth of this child, who was born at 8 a.m. on the date above stated  
(Born alive or stillborn.)\* When there was no attending physician or midwife, then the father, householder, etc., should make this return. A stillborn child is one that neither breathes nor shows other evidence of life after birth.  
Signature Delfina A. Dominges (Physician or midwife.)  
Address 808 Elm Oak StGiven name added from a supplemental report \_\_\_\_\_ Filed Oct 12, 1926 C. E. Dineen Local Registrar.  
Month, day, year

Registrar

Filed \_\_\_\_\_, 19\_\_\_\_

County Registrar.

951-1005-721